PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 09/680,608			Filing Date 10/04/2000		To be Mailed
APPLICATION AS FILED - PART I OTHER THAN (Column 1) (Column 2) SMALL ENTITY OR SMALL ENTITY													
	FOR NUMBER FILED			.ED	NUMBER EXTRA			RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	of (c))	N/A		N/A			N/A			•	N/A	
	SEARCH FEE (37 CFR 1.16(k), (i), (ii)	or (m))	N/A		N/A			N/A				N/A	
	EXAMINATION FE (37 CFR 1.16(o), (p),		N/A		N/A			N/A				N/A	
	TAL CLAIMS CFR 1.16(i))		minus 20 =		•			x \$	= .		OR	x \$ =	
	EPENDENT CLAIM CFR 1.16(h))	S	minus 3 =		•			X \$	O			x \$ =	
☐APPLICATION SIZE FEE (37 CFR 1.16(s)) If the specification and drawings estates of paper, the application si is \$250 (\$125 for small entity) for additional 50 sheets or fraction the 35 U.S.C. 41(a)(1)(G) and 37 CFR						n size fee due for each n thereof. See							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))													
* If the difference in column 1 is less than zero, enter "0" in column 2.									- [TOTAL	
	11/08/2006	(Column 1) CLAIMS REMAINING	S AMENDED - F (Columbia) Highe		umn 2) (Column 3)			SM RATE (L ENTITY ADDITIONAL	OR		ER THAN ALL ENTITY ADDITIONAL
AMENDMENT		AFTER AMENDMENT		PREVIO PAID F		EXTRA	1	·	*"	FEE (\$)			FEE (\$)
	Total (37 CFR 1.18(i))	• 62	Minus	 58		= 4		X \$	=		OR	X \$50=	200
	Independent (37 CFR 1.16(h))	• 5	Minus	***5		= 0		X \$	=		OR	X \$200=	0
AM	Application Size Fee (37 CFR 1.16(s))												
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))										OR		
											OR	TOTAL ADD'L FEE	200
4-3-07 (Column 1) (Column 2) (Column 3)													
DMENT		CLAIMS REMAINING AFTER AMENDMENT		PREV	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,18(i))	. 62	Minus	- 6	2	= 0		X \$	=		OR	x \$ =	0
	Independent (37 CFR 1.16(h))	· 5	Minus		5	= 0		X \$	=		OR	x \$ =	C
AMENDN	Application Size Fee (37 CFR 1.16(s))										1		0
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))							٠			OR		6
											OR	TOTAL ADD'L FEE	Q
(r	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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